

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jan Albert Creusere  
3943 Hazel Avenue  
Cincinnati, OH 45212-3827

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee  
*Jan Albert Creusere*
- B. Received by (Printed Name) *Jan Albert Creusere* Date of Delivery *Dec 4-9*
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7003 0500 0002 0889 8011

2. Article Number  
(Transfer from service label)

PS Form 3811, August 2001

01-1103 (Dec 99) HJW

Domestic Return Receipt

102595-02-11540